Case 3 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Sgt. John Carmichael Chambers County Sheriff's Departme 105 Alabama Avenue. W. LaFayette, AL 36862				A. Signature Addressee B. Received by (Printed Name) C. Date of Delivery A. Signature C. Date of Delivery A. Signature Addressee B. Received by (Printed Name) C. Date of Delivery A. Signature A. Signature Addressee B. Received by (Printed Name) C. Date of Delivery A. Signature A. Signature Addressee B. Received by (Printed Name) C. Date of Delivery A. Signature A. Signature A. Signature A. Signature A. Signature Addressee B. Received by (Printed Name) C. Date of Delivery A. Signature A. Signature A. Signature A. Signature A. Signature Addressee B. Received by (Printed Name) C. Date of Delivery A. Signature A. Signat					
				☐ Reg ☐ Insu	tified Mail istered ired Mail	□ C.O.D.	Mail Receipt for	Merchandise	
2. Article Number (Transfer from s	7005	7950 O		4. Restrict	ted Delivery	? (Extra Fee)]	☐ Yes	
PS Form 3811, Febru	ary 2004	Domes	stic Retur	n Receipt		7	102	595-02-M-1540	